DWS-OSD 126 Rev. 02/2008

State of Utah Department of Workforce Services

PLEASE USE A **BLACK BALL** POINT PEN TO **COMPLETE FORM**

VERIFICATION OF SCHOOL ATTENDANCE / ENROLLMENT

Case Name:	Case ID #:							
INSTRUCTIONS: Please verify the attendance/enrollment status of the child(ren) listed below by checking the appropriate box. Information on this form is used by the Department of Workforce Services and/or Department of Health. It is important to know if the student is participating as well as enrolled in school. Attach the attendance record for current term if available. Please list any additional information in the comment section below.								
	Student Status							
NAME	Date of Birth	Is Student Full- time? Yes/No	Is Student Part-time? Yes/No	Date of Enrollment	Is Student Attending Regularly?	Not a Student	Expected Graduation Month\Day\Yr	
 If this student has transferred or is no longer attending, please list last day of attendance: Name of new school (if known): 								
2. Student's address according to school records:								
Street: City, State:								
Phone #:								
3. Responsible person according to school records:4. Name and address of school:								
Street:								
City, State:								
Phone #: If you indicated that this student is not attending currently, what action is being taken to resolve the attendance issue?								
Signature of Official Completing Form					Phone #			
Comments:								

Equal Opportunity Employer Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711. Spanish Relay Utah: 1-888-346-3162.

